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HOBBS OFFICE O. C. C.
NEW MEXICO OIL CONSERVATION COMMISSION
JUL 13 7 05 PM '67

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
02 1617

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator	8. Farm or Lease Name
Skelly Oil Company	Hobbs "2"
3. Address of Operator	9. Well No.
Box 730 - Hobbs, New Mexico	1
4. Location of Well	10. Field and Pool, or Wildcat
UNIT LETTER "Q" , 660 FEET FROM THE South LINE AND 1980 FEET FROM	Todd Lower San Andras
THE East LINE, SECTION 19 TOWNSHIP 7-N RANGE 36-E NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.)	12. County
Unknown	Deerwalt

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Well Spudded 7/15/67. 12 jts (345') new 8-5/8" OD 24 3/4 8R 88 J-55 STAC casing set at 357'. Cemented with 250 sacks. Plug down 10:45 p.m. 7/15/67. Cement circulated to surface. WOC 24 hours. 8-5/8" OD casing tested to 1000# for 30 minutes. Tested OK. Drilled cement plug. Tested casing to 600# for 30 minutes. Casing shutoff tested OK.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED **(ORIGINAL) V. E. Fletcher** TITLE **District Superintendent** DATE **July 17, 1967**

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: